
WISCONSIN MEDICAID UPDATE

JANUARY 23, 1997

UPDATE 97-02

TO:
Nursing Homes

PASARR

Wisconsin Medicaid pays for OBRA Level I screens for *new* admissions only

Effective February 1, 1997, Wisconsin Medicaid will only pay for Level I screens done for individuals who are *newly* admitted to a nursing facility. New admissions include individuals admitted to any nursing facility who do not transfer from another nursing facility. Wisconsin Medicaid pays for these screens for all admissions, including Wisconsin Medicaid, Medicare, and "private pay" admissions.

Wisconsin Medicaid will pay the facility \$30 for each Level I screen performed that results in a *new* admission to a Medicaid-certified nursing facility.

Nursing facilities must conduct Level I screens as part of PASARR (Preadmission Screen Annual Resident Review). PASARR is an assessment process that determines whether a person has a serious mental illness or developmental disability and whether that person needs nursing home placement and specialized services. PASARR was created by OBRA (1989 Omnibus and Reconciliation Act).

Federal law *does not* allow nursing homes to admit individuals suspected of having a serious mental illness or a developmental disability unless a PASARR assessment determines that the person needs nursing home placement and specialized services.

For your information....

Modifications to PASARR are based on recent federal legislation. Federal law changed the Annual Resident Review (ARR) requirement as part of the federal Pre-Admission Screening and Annual Resident Review (PASARR) program. In addition to this Update, you will be receiving more information from the Division of Supportive Living, Wisconsin Department of Health and Family Services.

Wisconsin Medicaid will *not* pay for Level I screens done in any of the following instances:

1. Screens performed for individuals not admitted to the facility.
2. Screens performed for current nursing facility residents.
3. Screens performed for current nursing facility residents who experience a "change of status." The Division of Supportive Living will send you more information about "change of status."
4. Screens performed for residents who transfer from one nursing facility to another (with or without an intervening hospital stay).

Billing for Level I screens

Wisconsin Medicaid reminds nursing facilities that providers have only 365 days from the date of service to request payment from Wisconsin Medicaid. Also, a nursing facility may be subject to recoupment if providers bill inappropriately.

You may continue to obtain the OBRA Level I screen billing form from the Medicaid fiscal agent, EDS, at 6406 Bridge Road, Madison, WI 53784-0003.

Wisconsin Medicaid is developing a new billing form with an anticipated implementation date of Summer 1997. When the new form is developed, we will inform providers through a message on the remittance and status report.

If you have questions about the Medicaid payment policies for Level I screens, please contact the Bureau of Health Care Financing Nursing Home Section at (608) 267-0996.

If you have questions about other policies regarding Level I screens, please contact the Bureau of Community Mental Health, Division of Supportive Living at (608) 266-7072.

Record retention

Wisconsin Medicaid requires the nursing facility to keep a copy of the resident's Level I screen and results of other preadmission screenings in the resident's clinical record. Nursing facilities must maintain the records for seven years.

Federal law continues to require nursing facilities to perform OBRA Level I screens in specific instances

Regardless whether Wisconsin Medicaid pays, you *must* do a Level I screen in the following instances:

1. Preadmission.

All individuals seeking admission to a nursing facility must receive a Level I screen prior to admission. (Wisconsin Medicaid pays for these screens for all individuals admitted to the facility regardless of funding source.)

2. Change in Status.

All current residents who experience a "change of status." (Wisconsin Medicaid does not pay for these screens.)

Federal law does *not* require (and Wisconsin Medicaid does not pay) Level I screens in the following instances:

1. Readmissions.

Individuals who are being readmitted to a Medicaid-certified nursing facility after a hospital stay of any type or of any length.

2. Interfacility transfers.

Residents who are transferred from one nursing facility to another, with or without an intervening hospital stay, are not subject to another Level I Screen.

3. Other screens.

Screens updated on a periodic basis according to nursing facility policy.